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ATTENTION: Examiner Nguyen
FIRM/CO. NAME: U.S. Patent and Trademark Office
FAX NO: 703-872-9306
FROM: Ashok K. Janah
DATE: February 28, 2005
AMAT REFERENCE NO: 7034 USAP02/DSM/ELK/JW
OUR REFERENCE NO: 7034.P2

TOTAL NUMBER OF PAGES 12 (INCLUDING COVER PAGE)

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL Christy

BUSINESS PHONE: (415) 538-1555 FACSIMILE NO.: (415) 538-8380

MESSAGE:

Examiner Nguyen,

For your review please find the attached Amendment.

Kind regards,

Christy Hennigan

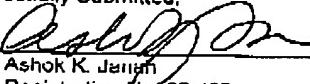
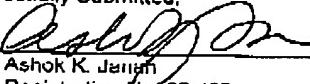
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Demos et al.	Group No: 2823
Application No: 10/783,748	Examiner: Khiem D. Nguyen
Confirmation No: 7358	Attorney Docket No: D07034 USA P02/DSM/ELK/JW
Filed: February 20, 2004	
Title: CLEAN PROCESS FOR AN ELECTRON BEAM SOURCE	Monday, February 28, 2005 San Francisco, CA 94107

Commissioner for Patents VIA FACSIMILE: (703) 872-9306	Extension of Time		
<input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Declaration <input type="checkbox"/> <u>0</u> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return	<input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136		
	Extension (Months)	Extension Fee	
		Large Entity	Small Entity
	1 One Month	\$120.00	\$60.00
	<input checked="" type="checkbox"/> Two Months	\$450.00	\$225.00
1 Three Months	\$1,020.00	\$510.00	
Total \$ 450.00			
I ¹ Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.			

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	20	20	0	\$50.00	\$25.00	\$0.00
Independent Claims	3	3	0	\$200.00	\$100.00	\$0.00
Multiple Dependent Claims			0	\$380.00	\$180.00	\$0.00
Supplemental Information Disclosure Statement						
					Total	\$0.00

Fee Payment	Fee Deficiency
Extension Fees \$0.00	<input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258.
Fees for Extra Claims \$450.00	<input checked="" type="checkbox"/> If any additional fee for claims is required; please charge Deposit Account No. 10-0258.
Total \$0.00	
I ¹ Attached is check no. _____ in the sum of \$0.00. <input checked="" type="checkbox"/> Please charge Deposit Account No. 10-0258 in the sum of \$450.00.	Please direct telephone calls to: Ashok K. Janah at (415) 538-1555. Please continue to send correspondence to: Applied Materials, Inc. Patent Department, M/S 2061 P.O. Box 450A Santa Clara, CA 95052
CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office at (703) 872-9308 on the date shown below.	Respectfully Submitted, By:  Christy Harrigan Date: February 28, 2005
By:  Ashok K. Janah Date: February 28, 2005 Registration No. 37,487	